## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**CORPORATION ANNUAL REPORT** 1998 DOCUMENT #
1. Corporation Name



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(1)

## **FAST IMPORT-EXPORT CORPORATION**

## **FILED** May 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						. BIBIL BIBIL GLBIL GIBIL BIBIL IDBI	
7329 N.W. 56TH ST. MIAMI FL 33168		P.O. BOX 557548 Miami FL 33255-7548 US		DO NOT WRITE IN TH	HIS SPACE		
					<ol> <li>Date Incorporated or Qualified</li> <li>10/03/1979</li> </ol>		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26	26		59- <b>19</b> 49119	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	} <del></del>		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	<u>├</u> ¬		Country		8. This corporation owes or has paid the		
24	25 29 30 30 Name and Address of Current Registered Agent		30		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent		
		irrent Hegistered Agent	8	1 Name	10. Name and Address of New Registe	ed Agent	
	ALINDEZ, HENRY		"	Name		<u>'</u>	
7329 NW 56 ST MIAMI FL 33166					fress (P.O. Box Number is Not Acceptable)		
			8:	3			
			8-	4 City		FL 85 Zip Code	
office or r	epiglered agent or both in the :	State of Florida. Such change was	s authorized b	ov the corpora	poration submits this statement for the purpo- ation's board of directors. I hereby accept the	se of changing its registered appointment as registered	
1	m tamiliar with, and accept the o	obligations of, Section 607.0505, I	rionda Statut	es.			
SIGNATURE	Stanature typed or printed name of register	ed agent and title it applicable (N	OTE: Registered A	gent signature requ	ired when reinstating) DA	TE .	
12.		S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
TITLE	PDST	DELETE	1.1 TITLE			☐ Change ☐ Addition	
NAME	GALINDEZ, HENRY		1.2 NAME	E		-	
STREET ADDRESS	7329 N.W. 56TH ST.		1.3 STRE	et address			
CITY-ST-ZIP	MIAMI FL		1.4 CITY	-ST-ZIP	•		
TITLE		☐ DELETE	2.1 TITLE	:		Change Addition	
NAME			2.2 NAM	Ε			
STREET ADDRESS			2 3 STRE	ET ADDRESS			
CITY-ST-ZIP			2 4 CITY				
TITLE		L DELETE	31 TITLE			Change Addition	
NAME			3 2 NAMI				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		C Deleve	3.4. CITY			Change Addition	
TITLE		☐ DELETE	4.1 TITLE	- 1		C cuange C Modition	
NAME			4. 2 NAM	-			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		DELETE	4.4 CITY 5.1 TITLE			Change Addition	
TITLE			5.2 NAMI	l l			
NAME OTREET ADDRESS				1			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY 6.1 TITLE			Change Addition	
		- Detell	6.2 NAM				
NAME CTREET ADDRESS			. I	ET ADDRESS			
STREET ADDRESS							
CITY-ST-ZIP	nertify that the information suppl	ind with this filling does not qualify	for the even		n Section 119.07(3)(i). Florida Statutes, I furth	er certify that the information	

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 1.19-07-30th, Florida Statutes. Forther certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed for on an attachment with an address.